NOV 0 5 2004

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Total Number of Pages in This Submission

Application Number 09/731,267

Filing Date December 6, 2000

First Named Inventor Joseph C. WILLIAMS

Art Unit 3624

Examiner Name S. WASYLCHAK

Attorney Docket Number 003433.00041

		ENCLOSURES (check all that apply)					
Fee Transmittal	Form	☐ Drawing(s)	After Allowance Communication to Group				
Fee Attache	d	Licensing-related Papers	Appeal Communication to Board of Appeals and Interferences				
Amendment / Re	eply	Petition	Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)				
After Final		Petition to Convert to a Provisional Application	Proprietary Information				
Affidavits/declaration(s)		Power of Attorney, Revocation Change of Correspondence Address	Status Letter				
		Terminal Disclaimer	Other Enclosure(s) (please identify below):				
Express Abando	nment Request	Request for Refund					
☐ Information Disclosure Statement		CD, Number of CD(s)					
Certified Copy of Priority Document(s)		Remarks	RECEIVED				
Response to Mis			NOV 1 2 2004				
Response to Missing Parts under 37 CFR 1.52 or 1.53		GROUP 3600					
	SIGNA	TURE OF APPLICANT, ATTORNEY, O	R AGENT				
Firm or Individual name	Anthony W. Ka	ndare, Reg. No. 48,830					
Signature Aut h		1. La dan					
Date November 5, 2		004					
	C	ERTIFICATE OF TRANSMISSION/MAIL	ING				

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FEE TRANSMITTAL	Complete if Known							
	Applica	Application Number 09/731,267						
for FY 2004	Filing Date			December 6, 2000				
Effective 10/01/2003. Patent fees are subject to annual revision.	First N	First Named Inventor			Joseph C. WILLIAMS			
Applicant claims small entity status. See 37 CFR 1.27	Examiner Name			s. wasylchak RECEI				
TOTAL AMOUNT OF PAYMENT (\$) 270		Art Unit Attorney Docket No.		003433.00041 NOV			V 1 2 j	
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Deposit	Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee De	scription	Fee Paid	
Account 19-0733	1051	130	2051	65	-	filing fee or oath		
Number	1052	50	2052	25	Surcharge - late or cover sheet.	provisional filing fee		
Deposit Deposit Control of LTD	1053	130	1053	130	Non-English spe	cification		
Account Name Banner & Witcoff, LTD.	1812	2,520	1812	2,520	For filing a reque	est for reexamination		
The Director is authorized to: (check all that apply)	1804	920*	1804	920*	Requesting publ	ication of SIR prior to		
	1805	1,840*	1805	1,840*		ication of SIR after		
☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.	1251	110	2251	55		ply within first month	110	
FEE CALCULATION	1252	430	2252	215		ply within second		
	1253	980	2253	490	month	ply within third month		
1. BASIC FILING FEE Large Entity Small Entity	1254	1,530	2253	765	Extension for rep	•		
Large Entity Small Entity Fee Fee Fee Fee Description		.,			month	, , , , , , , , , , , , , , , , , , ,		
Code (\$) Code (\$) Fee Paid	1255	2,080	2255	1,040	Extension for rep	ply within fifth month		
1001 790 2001 395 Utility filing fee	1401	340	2401	170	Notice of Appea			
1002 350 2002 175 Design filing fee	1402	340	2402	170	-	support of an appeal		
1003 550 2003 275 Plant filing fee	1403	300	2403	150	Request for oral	•		
1004 790 2004 395 Reissue filing fee	1451	1,510	1451	1,510	Petition to institu proceeding	ne a public use		
1005 160 2005 80 Provisional filling fee	1452	110	2452	55	Petition to revive	e – unavoidable		
SUBTOTAL (1) (\$) 0	1453	1,370	2453	685	Petition to revive	e – unintentional		
	1501	1,370	2501	685	Utility issue fee ((or reissue)		
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1502	490	2502	245	Design issue fee	•		
Extra Fee from Fee Claims below Paid	1503	660	2503	330	Plant issue fee	Director	\vdash	
Total Claims 27 -23 ** = 4 X 18 = 72	1460 1807	130 50	1460 1807	130 50	Processing fee	Director under 37 CFR 1.17 (q	+	
Independent 4 -3 ** = 1 X 88 = 88					_	inder 37 CFR 1.17 (q information Disclosure	′ 	
Multiple	1806	180	1806	180	Statement	patent assignment		
Dependent 0 X 290 = 0 Large Entity Small Entity	8021	40	8021	40	per property (time properties)	nes number of		
Fee Fee Fee Fee Description	1809	790	2809	395		ion after final rejection	n T	
Code (\$) Code (\$)	1810	790	2810	395	(37 CFR § 1.129	nal invention to be		
1202 18 2202 9 Claims in excess of 20 1201 88 2201 44 Independent claims in excess of 3	1010	790	2010	353	examined (37 Cl			
1203 300 2203 150 Multiple dependent claim, if not paid	1801	790	2801	395 I	Request for Contin	ued Examination (RCE	, —	
** Reissue independent claims over					•	,	′ 	
onginal patent	1802	900	1802	900	Request for exped of a design applic			
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SUBTOTAL (2) (\$) 160								
	*Reduc	*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 110						
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**or number previously paid, if greater; For Reissues, see above					Com	plete (if applicable)	-	
SUBMITTED BY		- 1-						
SUBMITTED BY Name Reg	istration No.		3.830		T	202-824-3000		
SUBMITTED BY Name Reg	istration No. orney/Agent		3,830		Telephone Date	202-824-3000)	

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